

PTO/SB/82 (01-08)

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REVOCATION OF POWER OF ATTORNEY WITH NEW POWER OF ATTORNEY AND CHANGE OF CORRESPONDENCE ADDRESS	Application Number	10/788,582
	Filing Date	02-24-2004
	First Named Inventor	Shaw P Kelly & Joseph R Galgan
	Art Unit	3724
	Examiner Name	Kenneth E Peterson
	Attorney Docket Number	

I hereby revoke all previous powers of attorney given in the above-identified application.

☒ A Power of Attorney is submitted herewith.

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☐ I hereby appoint the practitioners associated with the Customer Number: ☒ Please change the correspondence address for the above-identified application to:☐ The address associated with
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I am the:

☒ Applicant/Inventor.☐ Assignee of record of the entire interest. See 37 CFR 3.71.
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)

SIGNATURE of Applicant or Assignee of Record

Signature			
Name	Joseph R Galgan		
Date	02-15-2007	Telephone	1 781 837 8826

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.

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Comments:

Dear per your please find Revocation of Power of Attorney.
Thanks,
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